

SUE ANNE GILROY SECRETARY OF STATE CORPORATIONS DIVISION 302 W. Washington St., Rm. E018 Indianapolis, IN 46204 Telephone: (317) 232-6576

Indiana Code 23-1-49-4; 23-17-26-4

**INSTRUCTIONS:** Use 8 1/2" x 11" white paper for inserts.

Present original and two (2) copies to address in upper right corner of this form.

Please TYPE or PRINT.

**FILING FEE: \$30.00** 

NOTE: This application must be accompanied by a certificate of existence duly authenticated by the proper authority from the corporation's

## **APPLICATION FOR** AMENDED CERTIFICATE OF AUTHORITY

OF	
Name of Corporation	_
A FOREIGN CORPORATION ADMITTED TO TRANSACT BUSINESS IN INDIANA	
The undersigned officers of	_
(hereinafter referred to as the "Corporation"), which exists pursuant to the provisions of the laws of	_
as amended, desire to obtain an Amended Certificate of Authority.	
The above Corporation received a Certificate of Authority to transact business in the State of Indiana on the	
day of , 20	
2. The Corporation desires to change its corporate name in Indiana as follows.	
3. The Corporation has changed the period of its duration from	
4. The Corporation has changed the state or country of its incorporation from  to	
In Witness Whereof, the undersigned, being the of sai	id
Corporation executes this Application for Amended Certificate of Authority and verifies, subject to penalties of perjury, that the	e
statements contained herein are true, this day of , 20	_·
ature Printed name	